

# REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 32  
BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

<b>1. NAME OF COMMITTEE (in full)</b> RICHARDSON FOR PRESIDENT, INC.		<b>2. IDENTIFICATION NUMBER</b> C00431577	
<b>ADDRESS (number and street)</b> <input type="checkbox"/> Check if different than previously reported PO BOX 26208			
<b>CITY, STATE, and ZIP CODE</b> ALBUQUERQUE                      NM                      87125		<b>3. IS THIS REPORT FOR :</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	

**4. TYPE OF REPORT** (Check here ☐ if this is a Termination Report.)

☐ April 15 Quarterly Report  
☐ July 15 Quarterly Report  
☐ October 15 Quarterly Report  
☐ January 31 Year End Report

Monthly Report Due On:

<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20
<input type="checkbox"/> March 20	<input checked="" type="checkbox"/> July 20	<input type="checkbox"/> November 20
<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20
<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31

☐ Twelfth day report preceding \_\_\_\_\_ (Type of Election)  
    election on \_\_\_\_\_ in the State of \_\_\_\_\_

☐ Thirtieth day report following the General Election on \_\_\_\_\_  
    on \_\_\_\_\_

IS THIS REPORT AN AMENDMENT      ☐ YES      ☒ NO

5. COVERING PERIOD	FROM 06/01/2008	THROUGH 06/30/2008
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<b>SUMMARY</b>	6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD ..... 1745.73 7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2) ..... 39113.93 8. SUBTOTAL (Lines 6 and 7) ..... 40859.66 9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2) ..... 39557.33 10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8) ..... 1302.33 11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) ..... 0.00 12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) ..... 292726.99 13. EXPENDITURES SUBJECT TO LIMITATION ..... .00	
<b>NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES</b>	14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) ..... 21985661.72 15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2) ..... 22049966.99	

**I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.**

Type or Print Name of Treasurer <b>Reta D. Jones</b>	Date 07/20/2008
Signature of Treasurer	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.  
 All previous versions of FEC FORM 3P are obsolete and should no longer be used.

<b>For further information contact:</b> Federal Election Commission 999 E Street, N.W. Washington, DC 20463	Toll Free 800-424-9530 Local 202-694-1100	<b>FEC FORM 3P</b> <b>(01/2001)</b>
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**DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS****2 / 32**

(PAGE 2, FEC FORM 3P)

Name of committee (in full)

**RICHARDSON FOR PRESIDENT, INC.**

Report Covering the Period

From: 06/01/2008

To: 06/30/2008

<b>I. RECEIPTS</b>		<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
16. FEDERAL FUNDS (Itemize on Schedule A-P) .....	0.00	0.00	
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees .....	13265.75	22717037.30	
(b) Political Party Committees .....	0.00	0.00	
(c) Other Political Committees .....	8000.00	282579.00	
(d) The Candidate .....	0.00	2300.00	
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d)) .....	21265.75	23001916.30	
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00	
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate .....	0.00	0.00	
(b) Other Loans .....	0.00	1000000.00	
(c) TOTAL LOANS (Add 19(a) and 19(b)) .....	0.00	1000000.00	
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating .....	17848.18	344264.74	
(b) Fundraising .....	0.00	0.00	
(c) Legal and Accounting .....	0.00	0.00	
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c)) .....	17848.18	344264.74	
21. OTHER RECEIPTS (Dividend, Interest, etc.) .....	0.00	65607.60	
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21) .....	39113.93	24411788.64	
<b>II. DISBURSEMENTS</b>			
23. OPERATING EXPENDITURES .....	39357.33	22394231.73	
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00	
25. FUNDRAISING DISBURSEMENTS .....	0.00	0.00	
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS .....	0.00	0.00	
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate .....	0.00	0.00	
(b) Other Repayments .....	0.00	1000000.00	
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)) .....	0.00	1000000.00	
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees .....	200.00	995154.58	
(b) Political Party Committees .....	0.00	0.00	
(c) Other Political Committees .....	0.00	21100.00	
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c)) .....	200.00	1016254.58	
29. OTHER DISBURSEMENTS .....	0.00	0.00	
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29) .....	39557.33	24410486.31	
<b>III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)</b>			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List) .....	.00		

**ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE**  
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)  
 (PAGE 3, FEC FORM 3P)

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**1. NAME OF COMMITTEE (in full)****RICHARDSON FOR PRESIDENT, INC.****ADDRESS (number and street)**

PO BOX 26208

**CITY, STATE, and ZIP CODE**

ALBUQUERQUE

NM

87125

**2. IDENTIFICATION NUMBER**

C00431577

## ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	.00	.00	Nebraska	.00	.00
Alaska	.00	.00	Nevada	.00	.00
Arizona	.00	.00	New Hampshire	.00	.00
Arkansas	.00	.00	New Jersey	.00	.00
California	.00	.00	New Mexico	.00	.00
Colorado	.00	.00	New York	.00	.00
Connecticut	.00	.00	North Carolina	.00	.00
Delaware	.00	.00	North Dakota	.00	.00
District of Columbia	.00	.00	Ohio	.00	.00
Florida	.00	.00	Oklahoma	.00	.00
Georgia	.00	.00	Oregon	.00	.00
Hawaii	.00	.00	Pennsylvania	.00	.00
Idaho	.00	.00	Rhode Island	.00	.00
Illinois	.00	.00	South Carolina	.00	.00
Indiana	.00	.00	South Dakota	.00	.00
Iowa	.00	.00	Tennessee	.00	.00
Kansas	.00	.00	Texas	.00	.00
Kentucky	.00	.00	Utah	.00	.00
Louisiana	.00	.00	Vermont	.00	.00
Maine	.00	.00	Virginia	.00	.00
Maryland	.00	.00	Washington	.00	.00
Massachusetts	.00	.00	West Virginia	.00	.00
Michigan	.00	.00	Wisconsin	.00	.00
Minnesota	.00	.00	Wyoming	.00	.00
Mississippi	.00	.00	Puerto Rico	.00	.00
Missouri	.00	.00	Guam	.00	.00
Montana	.00	.00	Virgin Islands	.00	.00
			<b>TOTALS</b>	<b>.00</b>	<b>.00</b>

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 4 / 32

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICHARDSON FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

FRANCIS WILCOX

Mailing Address

9413 BYEFORDE ROAD

City

KENSINGTON

State

MD

Zip Code

20895

FEC ID number of contributing  
federal political committee.

Name of Employer  
USAID

Occupation

DEVELOPMENT ADVISOR

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 2 / 2 0 0 8

Amount of Each Receipt this Period

300.00

Transaction ID: 17a-000134480

B.

Full Name (Last, First, Middle Initial)

VICTOR LOPEZ

Mailing Address

622 GRACELAND SE

City

ALBUQUERQUE

State

NM

Zip Code

87108

FEC ID number of contributing  
federal political committee.

Name of Employer  
N.M. WORKERS COMPENSATION  
ADMIN.

Occupation

WCA JUDGE

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: 17a-000134485

C.

Full Name (Last, First, Middle Initial)

CHRISTOPHER WALSH

Mailing Address

25675 MAPLE VIEW COURT

City

SHOREWOOD

State

MN

Zip Code

55331

FEC ID number of contributing  
federal political committee.

Name of Employer  
UNITEDHEALTH GROUP

Occupation

DEPUTY GENERAL COUNSEL

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

1000.00

Transaction ID: 17a-000134489

**SUBTOTAL** of Receipts This Page (optional) .....

1550.00

**TOTAL** This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICHARDSON FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

PETER WALSH

Mailing Address

495 HIGHCROFT ROAD

City

WAYZATA

State

MN

Zip Code

55391

FEC ID number of contributing  
federal political committee.

Name of Employer  
UNITEDHEALTH GROUP

Occupation

DEPUTY GENERAL COUNSEL

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

1000.00

Transaction ID: 17a-000134490

B.

Full Name (Last, First, Middle Initial)

MITCH ZAMOFF

Mailing Address

908 NORTH EMERSON STREET

City

ARLINGTON

State

VA

Zip Code

22205

FEC ID number of contributing  
federal political committee.

Name of Employer  
UNITEDHEALTH GROUP

Occupation

DEPUTY GENERAL COUNSEL

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

1000.00

Transaction ID: 17a-000134491

C.

Full Name (Last, First, Middle Initial)

JAY BOLING

Mailing Address

7109 FAIRBANKS DR. NE

City

RIO RANCHO

State

NM

Zip Code

87144

FEC ID number of contributing  
federal political committee.

Name of Employer  
JAY BOLING INC

Occupation

PRESIDENT/PILOT

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

2300.00

IN-KIND

Transaction ID: 17a-000134505

SUBTOTAL of Receipts This Page (optional) .....

4300.00

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICHARDSON FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

JESSIKA BOLING

Mailing Address

7109 FAIRBANKS DR. NE

City

RIO RANCHO

State

NM

Zip Code

87144

FEC ID number of contributing  
federal political committee.

Name of Employer  
CONTINENTAL AIRLINES

Occupation

FLIGHT ATTENDANT

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Amount of Each Receipt this Period

2300.00

IN-KIND

Transaction ID: 17a-000134506

B.

Full Name (Last, First, Middle Initial)

MARY TIMM

Mailing Address

PO BOX 15567

City

PHOENIX

State

AZ

Zip Code

85060

FEC ID number of contributing  
federal political committee.

Name of Employer  
SELF-EMPLOYED

Occupation

HEALTHCARE

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 1 / 2 0 0 8

Amount of Each Receipt this Period

250.00

Transaction ID: 17a-000134492

C.

Full Name (Last, First, Middle Initial)

JOHN MORGAN

Mailing Address

661 WILLOW RIDGE DRIVE NE

City

MARIETTA

State

GA

Zip Code

30068

FEC ID number of contributing  
federal political committee.

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

75.00

Transaction ID: 17a-000134504

**SUBTOTAL** of Receipts This Page (optional) .....

2625.00

**TOTAL** This Period (last page this line number only) .....

# Schedule A-P

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICHARDSON FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

MEI-LING L. SHEK-STEFAN

Mailing Address

820 COVENTRY COURT

City

SUNNYVALE

State

CA

Zip Code

94087

FEC ID number of contributing  
federal political committee.

Name of Employer  
SANTA CLARA UNIVERSITY

Occupation

PROFESSOR

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

100.00

Transaction ID: 17a-000134502

B.

Full Name (Last, First, Middle Initial)

JAMES BAUMBACH

Mailing Address

926 LOCUST STREET

City

PHILADELPHIA

State

PA

Zip Code

19107

FEC ID number of contributing  
federal political committee.

Name of Employer  
SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

500.00

Transaction ID: 17a-000134499

C.

Full Name (Last, First, Middle Initial)

JAMES HARDY

Mailing Address

8515 STENTON AVE.

City

WYNDMOOR

State

PA

Zip Code

19038

FEC ID number of contributing  
federal political committee.

Name of Employer  
JHL ENTERPRISES

Occupation

EXECUTIVE

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

500.00

Transaction ID: 17a-000134500

**SUBTOTAL** of Receipts This Page (optional) .....

1100.00

**TOTAL** This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 / 32

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICHARDSON FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)  
LAWRENCE CEISLER

Mailing Address  
8112 ST. MARTINS LANE

City State Zip Code  
PHILADELPHIA PA 19118

FEC ID number of contributing  
federal political committee.

Name of Employer  
CEISLER & BELINER

Occupation  
CONSULTANT

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

500.00

Transaction ID: 17a-000134501

B.

Full Name (Last, First, Middle Initial)  
WILLIAM MUNSELL

Mailing Address  
2119 WINDSONG CIRCLE

City State Zip Code  
WAYZATA MN 55391

FEC ID number of contributing  
federal political committee.

Name of Employer  
UNITED HEALTH GROUP

Occupation  
EXECUTIVE

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

2000.00

Transaction ID: 17a-000134497

C.

Full Name (Last, First, Middle Initial)  
SANDRA GRISHAM

Mailing Address  
1421 ROCKWOOD

City State Zip Code  
ALAMOGORDO NM 88310

FEC ID number of contributing  
federal political committee.

Name of Employer  
OTERO COUNTY- NM

Occupation  
ASSISTANT

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Amount of Each Receipt this Period

500.00

Transaction ID: 17a-000134495

SUBTOTAL of Receipts This Page (optional) .....

3000.00

TOTAL This Period (last page this line number only) .....

12575.00



# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 32

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input checked="" type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICHARDSON FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

AQUA AMERICA, INC. PAC

Mailing Address

762 W. LANCASTER AVENUE

City

BRYN MAWR

State

PA

Zip Code

19010

FEC ID number of contributing  
federal political committee.

C00340455

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

500.00

Transaction ID: 17c-000134498

B.

Full Name (Last, First, Middle Initial)

I.A.T.S.E. PAC

Mailing Address

1430 BROADWAY 20TH FL.

City

NEW YORK

State

NY

Zip Code

10018

FEC ID number of contributing  
federal political committee.

C00344325

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

2500.00

Transaction ID: 17c-000134503

C.

Full Name (Last, First, Middle Initial)

UNITED FOR HEALTH PAC

Mailing Address

9900 BREN ROAD EAST

City

MINNETONKA

State

MN

Zip Code

55343

FEC ID number of contributing  
federal political committee.

C00274431

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

5000.00

Transaction ID: 17c-000134496

**SUBTOTAL** of Receipts This Page (optional) .....

8000.00

**TOTAL** This Period (last page this line number only) .....

8000.00

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 32

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICHARDSON FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

NEXUSDIRECT

Mailing Address

621 LYNNHAVEN PKWY.

SUITE 251

City

VIRGINIA BEACH

State

VA

Zip Code

23452

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

94730.70

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Amount of Each Receipt this Period

15145.26

LIST RENTAL

Transaction ID: 20a-01-01455-01525

B.

Full Name (Last, First, Middle Initial)

COMCAST

Mailing Address

PO BOX 1577

City

NEWARK

State

NJ

Zip Code

07101-1577

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

34.53

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Amount of Each Receipt this Period

34.53

REFUND

Transaction ID: 20a-01-01449-01519

C.

Full Name (Last, First, Middle Initial)

QWEST

Mailing Address

PO BOX 91154

City

SEATTLE

State

WA

Zip Code

98111-9254

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5108.88

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Amount of Each Receipt this Period

44.49

REFUND

Transaction ID: 20a-01-01453-01523

SUBTOTAL of Receipts This Page (optional) .....

15224.28

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 32

(check only one)

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

RICHARDSON FOR PRESIDENT, INC.

<b>A.</b> Full Name (Last, First, Middle Initial) QWEST	Date of Receipt
Mailing Address PO BOX 91154	<div> <div>M M / D D / Y Y Y Y Y</div> <div>0 6 / 2 4 / 2 0 0 8</div> </div>
City State Zip Code SEATTLE WA 98111-9254	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<div>195.01</div>
Name of Employer Occupation	REFUND
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <div>5108.88</div>
<b>Transaction ID:</b> 20a-01-01452-01522	
<b>B.</b> Full Name (Last, First, Middle Initial) PAUL BLANCHARD	Date of Receipt
Mailing Address 5850 EUBANK, NE SUITE B62	<div> <div>M M / D D / Y Y Y Y Y</div> <div>0 6 / 2 4 / 2 0 0 8</div> </div>
City State Zip Code ALBUQUERQUE NM 87111	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<div>456.00</div>
Name of Employer Occupation	PURCHASE OF EQUIPMENT
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <div>456.00</div>
<b>Transaction ID:</b> 20a-01-01448-01518	
<b>C.</b> Full Name (Last, First, Middle Initial) MCINTOSH CONSULTING LLC	Date of Receipt
Mailing Address 1803 BOWENS ISLAND	<div> <div>M M / D D / Y Y Y Y Y</div> <div>0 6 / 2 6 / 2 0 0 8</div> </div>
City State Zip Code CHARLESTON SC 29412	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<div>219.21</div>
Name of Employer Occupation	COBRA PAYMENT
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <div>657.63</div>
<b>Transaction ID:</b> 20a-01-01459-01529	

**SUBTOTAL** of Receipts This Page (optional) .....

870.22

**TOTAL** This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 32

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICHARDSON FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

BRYAN FINKEN

Mailing Address

2168 S EVERETT ST

City

LAKEWOOD

State

CO

Zip Code

80227

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

876.84

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

219.21

COBRA PAYMENT

Transaction ID: 20a-01-01461-01531

B.

Full Name (Last, First, Middle Initial)

MAXIMILLIAN FELDMAN

Mailing Address

525 E. 80TH STREET

City

NEW YORK

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1096.05

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

219.21

COBRA PAYMENT

Transaction ID: 20a-01-01462-01532

C.

Full Name (Last, First, Middle Initial)

MAXIMILLIAN FELDMAN

Mailing Address

525 E. 80TH STREET

City

NEW YORK

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1096.05

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

219.21

COBRA PAYMENT

Transaction ID: 20a-01-01463-01533

SUBTOTAL of Receipts This Page (optional) .....

657.63

TOTAL This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 32

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICHARDSON FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

JOSHUA KRAKOW

Mailing Address

520 S. 13TH STREET D-26

City

LAS VEGAS

State

NV

Zip Code

89101

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

219.21

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

219.21

COBRA PAYMENT

Transaction ID: 20a-01-01464-01534

B.

Full Name (Last, First, Middle Initial)

ANNA VEVERKA

Mailing Address

581 HAVEN LOOP

City

JEMEZ SPRINGS

State

NM

Zip Code

87025

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1091.05

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

219.21

COBRA PAYMENT

Transaction ID: 20a-01-01465-01535

C.

Full Name (Last, First, Middle Initial)

JOHN STOVALL JR

Mailing Address

6618 REGALBLUFF DRIVE

City

DALLAS

State

TX

Zip Code

75248

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

876.84

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

219.21

COBRA PAYMENT

Transaction ID: 20a-01-01466-01536

**SUBTOTAL** of Receipts This Page (optional) .....

657.63

**TOTAL** This Period (last page this line number only) .....

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 32

☐ 16 ☐ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

RICHARDSON FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

MCINTOSH CONSULTING LLC

Mailing Address

1803 BOWENS ISLAND

City

CHARLESTON

State

SC

Zip Code

29412

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

657.63

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

219.21

COBRA PAYMENT

Transaction ID: 20a-01-01468-01538

B.

Full Name (Last, First, Middle Initial)

JAMES FARRELL

Mailing Address

308 COURT AVE APT 216

City

DES MOINES

State

IA

Zip Code

50309

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

877.63

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Amount of Each Receipt this Period

219.21

COBRA PAYMENT

Transaction ID: 20a-01-01469-01539

SUBTOTAL of Receipts This Page (optional) .....

438.42

TOTAL This Period (last page this line number only) .....

17848.18

X	23		24		25		26		27a
	27b		28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
RICHARDSON FOR PRESIDENT, INC.

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>BANK OF AMERICA</b>		Transaction ID: 23-03-01058-01075 Date of Disbursement	
	Mailing Address      303 ROMA AVE.		<div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 2 / 2 0 0 8</div>	
	City                                  State                  Zip Code ALBUQUERQUE                  NM                  87102		Amount of Each Disbursement this Period	
	Purpose of Disbursement MERCHANT FEES		<div></div> <div>47.62</div>	
	Candidate Name	Category/ Type		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:              District:		Disbursement For:      2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>AMERICAN EXPRESS</b>		Transaction ID: 23-03-01059-01076 Date of Disbursement	
	Mailing Address      PO BOX 53852		<div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 2 / 2 0 0 8</div>	
	City                                  State                  Zip Code PHOENIX                          AZ                  85072-3852		Amount of Each Disbursement this Period	
	Purpose of Disbursement MERCHANT FEES		<div></div> <div>4.50</div>	
	Candidate Name	Category/ Type		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:              District:		Disbursement For:      2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>AUTHORIZE.NET CORP.</b>		Transaction ID: 23-03-01060-01077 Date of Disbursement	
	Mailing Address      915 SOUTH 500 EAST, SUITE 200		<div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 3 / 2 0 0 8</div>	
	City                                  State                  Zip Code AMERICAN FORK                  UT                  84003		Amount of Each Disbursement this Period	
	Purpose of Disbursement MERCHANT FEES		<div></div> <div>33.30</div>	
	Candidate Name	Category/ Type		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:              District:		Disbursement For:      2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)			<div></div> <div>85.42</div>	
TOTAL This Period (last page this line number only)				

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
RICHARDSON FOR PRESIDENT, INC.

<b>A.</b> Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	<b>Transaction ID:</b> 23-03-01062-01079 <b>Date of Disbursement</b>																				
Mailing Address PO BOX 53852	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	4		2	0	0	8												
City PHOENIX State AZ Zip Code 85072-3852	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement MERCHANT FEES Candidate Name	<table border="1"> <tr> <td colspan="10">0.66</td> </tr> </table>	0.66																			
0.66																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) UNITED HEALTH CARE	<b>Transaction ID:</b> 23-04-06579-07017 <b>Date of Disbursement</b>																				
Mailing Address 450 COLUMBUS BLVD.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	3		2	0	0	8												
City HARTFORD State CT Zip Code 06103	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement INSURANCE Candidate Name	<table border="1"> <tr> <td colspan="10">4104.78</td> </tr> </table>	4104.78																			
4104.78																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) CELLHIRE MOBILE SOLUTIONS	<b>Transaction ID:</b> 23-04-06580-07018 <b>Date of Disbursement</b>																				
Mailing Address ATTN: CARROL THOMPSON 3520 WEST MILLER ROAD, SUITE 100	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	3		2	0	0	8												
City GARLAND State TX Zip Code 75041	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CELL PHONES Candidate Name	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

9105.44

**TOTAL** This Period (last page this line number only) .....



# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 32

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
RICHARDSON FOR PRESIDENT, INC.

<b>A.</b> Full Name (Last, First, Middle Initial) DELTACOM Mailing Address PO BOX 740597	<b>Transaction ID:</b> 23-04-06581-07019 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 3 / 2 0 0 8</div> </div>
City ATLANTA State GA Zip Code 30374-0597 Purpose of Disbursement PHONE SERVICE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>1910.88</div>
<b>B.</b> Full Name (Last, First, Middle Initial) DELTACOM Mailing Address PO BOX 740597 City ATLANTA State GA Zip Code 30374-0597 Purpose of Disbursement PHONE SERVICE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 23-04-06581-07022 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 3 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1183.02</div>
<b>C.</b> Full Name (Last, First, Middle Initial) CARTER PRINTING Mailing Address 1739 E. GRAND AVE. City DES MOINES State IA Zip Code 50316 Purpose of Disbursement PRINTING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 23-04-06582-07020 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 3 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>3392.00</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

6485.90

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
RICHARDSON FOR PRESIDENT, INC.

<b>A.</b> Full Name (Last, First, Middle Initial) THE HARTFORD Mailing Address PO BOX 2907	<b>Transaction ID:</b> 23-04-06583-07021 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 3 / 2 0 0 8</div> </div>
City HARTFORD State CT Zip Code 06104 Purpose of Disbursement INSURANCE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>579.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) BANK OF AMERICA Mailing Address 303 ROMA AVE. City ALBUQUERQUE State NM Zip Code 87102 Purpose of Disbursement BANK FEES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 23-01-01446-01516 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>64.50</div>
<b>C.</b> Full Name (Last, First, Middle Initial) BANK OF AMERICA Mailing Address 303 ROMA AVE. City ALBUQUERQUE State NM Zip Code 87102 Purpose of Disbursement BANK FEES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 23-04-06584-07023 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>289.80</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

933.30

**TOTAL** This Period (last page this line number only) ..... ►

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
RICHARDSON FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)  
JAY BOLING

Mailing Address 7109 FAIRBANKS DR NE

City State Zip Code  
RIO RANCHO NM 87144

Purpose of Disbursement  
IN-KIND: TRAVEL (WINGS MANAGEMENT)

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 23-00-00116-00116

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

B.

Full Name (Last, First, Middle Initial)  
JESSIKA BOLING

Mailing Address 7109 FAIRBANKS DR NE

City State Zip Code  
RIO RANCHO NM 87144

Purpose of Disbursement  
IN-KIND: TRAVEL (WINGS MANAGEMENT)

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 23-00-00118-00118

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2300.00

C.

Full Name (Last, First, Middle Initial)  
BLUE STATE DIGITAL

Mailing Address 734 15TH ST. NW  
SUITE 1000

City State Zip Code  
WASHINGTON DC 20005

Purpose of Disbursement  
CONSULTANT - WEB/INTERNET

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 23-04-06631-07070

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

5100.00

TOTAL This Period (last page this line number only) .....

X	23		24		25		26		27a
	27b		28a		28b		28c		29

NAME OF COMMITTEE (In Full)  
RICHARDSON FOR PRESIDENT, INC.

FEC Schedule B ( Form 3P)

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
RICHARDSON FOR PRESIDENT, INC.

<b>A.</b> Full Name (Last, First, Middle Initial) ARTICULATED MAN INC.	<b>Transaction ID:</b> 23-04-06635-07074 <b>Date of Disbursement</b>																				
Mailing Address 1508 W. SUNNYSIDE AVE.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		3	0		2	0	0	8												
City CHICAGO State IL Zip Code 60640	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement WEBSITE DEVELOPMENT	<table border="1"> <tr> <td colspan="10">1600.00</td> </tr> </table>	1600.00																			
1600.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) NEW MEXICO MUTUAL	<b>Transaction ID:</b> 23-04-06636-07075 <b>Date of Disbursement</b>																				
Mailing Address 3900 SINGER BLVD.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		3	0		2	0	0	8												
City ALBUQUERQUE State NM Zip Code 87109	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement INSURANCE	<table border="1"> <tr> <td colspan="10">5074.00</td> </tr> </table>	5074.00																			
5074.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) SLINGSHOT, LLC	<b>Transaction ID:</b> 23-04-06637-07076 <b>Date of Disbursement</b>																				
Mailing Address 208 NORTH MARKET STREET SUITE 500	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		3	0		2	0	0	8												
City DALLAS State TX Zip Code 75202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement INTERNET ADVERTISING	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

11674.00

**TOTAL** This Period (last page this line number only) .....

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
RICHARDSON FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)  
DEMSTORE.COM

Mailing Address 5125 MACARTHUR BLVD, NW  
SUITE 14

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement  
PRINTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 23-04-06638-07077  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

1248.15

B.

Full Name (Last, First, Middle Initial)  
DIVERSIFIED PROPERTY MANAGEMENT

Mailing Address PO BOX 1009

City RENO State NV Zip Code 89504

Purpose of Disbursement  
RENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 23-04-06639-07078  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

1200.00

C.

Full Name (Last, First, Middle Initial)  
WHITNEY W. BURNS

Mailing Address PO BOX 1174

City SPRINGFIELD State VA Zip Code 22151

Purpose of Disbursement  
CONSULTANT - COMPLIANCE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 23-04-06641-07080  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) .....

4948.15

TOTAL This Period (last page this line number only) .....

39272.69

# Schedule B-P

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 32

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
RICHARDSON FOR PRESIDENT, INC.

A.

Full Name (Last, First, Middle Initial)

JAMES J. BAUM

Mailing Address 52 RUSFORD DRIVE

City  
FLEETWOOD

State  
PA

Zip Code  
19522

Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 28a-04-06629-07068

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

SUBTOTAL of Disbursements This Page (optional) .....

200.00

TOTAL This Period (last page this line number only) .....

200.00

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 24 / 32

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
RICHARDSON FOR PRESIDENT, INC.

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Arevalo Sanchez

Nature of Debt (Purpose):  
Consulting - Constituency  
Outreach

Mailing Address 3321 Via San Delarro

City State ZIP Code  
Montebello CA 90640

Outstanding Balance Beginning This Period

4000.00

Transaction ID: 12-000031

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Branch Law Firm Aviation, Ltd.

Nature of Debt (Purpose):  
Travel

Mailing Address 2025 Rio Grande Blvd. NW

City State ZIP Code  
Albuquerque NM 87104

Outstanding Balance Beginning This Period

26362.75

Transaction ID: 12-000032

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

26362.75

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Whitney W. Burns

Nature of Debt (Purpose):  
Consultant - Compliance

Mailing Address PO Box 1174

City State ZIP Code  
Springfield VA 22151

Outstanding Balance Beginning This Period

0.00

Transaction ID: 12-000098

Amount Incurred This Period

7500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7500.00

1) **SUBTOTALS** This Period This Page (optional).....

37862.75

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 25 / 32

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
RICHARDSON FOR PRESIDENT, INC.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Carter PrintingNature of Debt (Purpose):  
Printing

Mailing Address 1739 E. Grand Ave.

City State ZIP Code  
Des Moines IA 50316

Outstanding Balance Beginning This Period

3392.00

Transaction ID: 12-000033

Amount Incurred This Period

0.00

Payment This Period

3392.00

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Cellhire Mobile SolutionsNature of Debt (Purpose):  
Cell PhonesMailing Address Attn: Carrol Thompson  
3520 West Miller Road, Suite 100City State ZIP Code  
Garland TX 75041

Outstanding Balance Beginning This Period

5000.00

Transaction ID: 12-000055

Amount Incurred This Period

0.00

Payment This Period

5000.00

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Cellhire Mobile SolutionsNature of Debt (Purpose):  
Cell PhonesMailing Address Attn: Carrol Thompson  
3520 West Miller Road, Suite 100City State ZIP Code  
Garland TX 75041

Outstanding Balance Beginning This Period

5219.44

Transaction ID: 12-000093

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5219.44

**1) SUBTOTALS** This Period This Page (optional).....

5219.44

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 26 / 32

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
RICHARDSON FOR PRESIDENT, INC.

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Dave Contarino

Nature of Debt (Purpose):  
Travel

Mailing Address 7 Arroyo Hondo Trl.

City State ZIP Code  
Santa Fe NM 87508

Outstanding Balance Beginning This Period

0.00

Transaction ID: 12-000097

Amount Incurred This Period

1200.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1200.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Deltacom

Nature of Debt (Purpose):  
Phone Service

Mailing Address PO Box 740597

City State ZIP Code  
Atlanta GA 30374-0597

Outstanding Balance Beginning This Period

1910.88

Transaction ID: 12-000087

Amount Incurred This Period

0.00

Payment This Period

1910.88

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Deltacom

Nature of Debt (Purpose):  
Phone Service

Mailing Address PO Box 740597

City State ZIP Code  
Atlanta GA 30374-0597

Outstanding Balance Beginning This Period

1183.02

Transaction ID: 12-000094

Amount Incurred This Period

0.00

Payment This Period

1183.02

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

1200.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
RICHARDSON FOR PRESIDENT, INC.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
DemStore.comNature of Debt (Purpose):  
PrintingMailing Address 5125 MacArthur Blvd, NW  
Suite 14City State ZIP Code  
Washington DC 20016

Outstanding Balance Beginning This Period

1248.15

Transaction ID: 12-000058

Amount Incurred This Period

0.00

Payment This Period

1248.15

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Diversified Property ManagementNature of Debt (Purpose):  
Office Rent

Mailing Address PO Box 1009

City State ZIP Code  
Reno NV 89504

Outstanding Balance Beginning This Period

1200.00

Transaction ID: 12-000057

Amount Incurred This Period

0.00

Payment This Period

1200.00

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Gulfstream Lomas Ltd.Nature of Debt (Purpose):  
Office Rent

Mailing Address PO Box 81200

City State ZIP Code  
Albuquerque NM 87198

Outstanding Balance Beginning This Period

3541.25

Transaction ID: 12-000062

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3541.25

**1) SUBTOTALS** This Period This Page (optional).....

3541.25

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

RICHARDSON FOR PRESIDENT, INC.

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Harmon, Curran, Spielberg & Eisenberg, LLPNature of Debt (Purpose):  
Legal ServicesMailing Address 1726 M Street NW  
Suite 600City State ZIP Code  
Washington DC 20036

Outstanding Balance Beginning This Period

6571.49

Transaction ID: 12-000081

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6571.49

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Harmon, Curran, Spielberg & Eisenberg, LLPNature of Debt (Purpose):  
Legal ServicesMailing Address 1726 M Street NW  
Suite 600City State ZIP Code  
Washington DC 20036

Outstanding Balance Beginning This Period

0.00

Transaction ID: 12-000096

Amount Incurred This Period

26.44

Payment This Period

0.00

Outstanding Balance at Close of This Period

26.44

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Lea King LLCNature of Debt (Purpose):  
Travel

Mailing Address P.O. Box 2306

City State ZIP Code  
Hobbs NM 88241-2306

Outstanding Balance Beginning This Period

203850.70

Transaction ID: 12-000038

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

203850.70

1) **SUBTOTALS** This Period This Page (optional).....

210448.63

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 29 / 32

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
RICHARDSON FOR PRESIDENT, INC.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MicroByteNature of Debt (Purpose):  
Computer Equipment

Mailing Address 1410 Colonial Life Blvd.

City State ZIP Code  
Columbia SC 29210

Outstanding Balance Beginning This Period

0.00

Transaction ID: 12-000095

Amount Incurred This Period

831.99

Payment This Period

0.00

Outstanding Balance at Close of This Period

831.99

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Otero Contracting LLCNature of Debt (Purpose):  
Office Rent

Mailing Address P.O. Box 524

City State ZIP Code  
Santa Fe NM 87504

Outstanding Balance Beginning This Period

2000.00

Transaction ID: 12-000042

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Otero Contracting LLCNature of Debt (Purpose):  
Office Rent

Mailing Address P.O. Box 524

City State ZIP Code  
Santa Fe NM 87504

Outstanding Balance Beginning This Period

1000.00

Transaction ID: 12-000068

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

**1) SUBTOTALS** This Period This Page (optional).....

3831.99

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 30 / 32

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
RICHARDSON FOR PRESIDENT, INC.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Rock Coast Media Inc.Nature of Debt (Purpose):  
Internet AdvertisingMailing Address 38 Merrimac St.  
Suite 203City State ZIP Code  
Newburyport MA 01950

Outstanding Balance Beginning This Period

1711.22

Transaction ID: 12-000044

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1711.22

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Slingshot, LLCNature of Debt (Purpose):  
Internet AdvertisingMailing Address 208 North Market Street  
Suite 500City State ZIP Code  
Dalllas TX 75202

Outstanding Balance Beginning This Period

9970.81

Transaction ID: 12-000083

Amount Incurred This Period

0.00

Payment This Period

5000.00

Outstanding Balance at Close of This Period

4970.81

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
TravelersNature of Debt (Purpose):  
Wokers Compensation

Mailing Address 1Tower Square 4GS

City State ZIP Code  
Hartford CT 06183-9079

Outstanding Balance Beginning This Period

0.00

Transaction ID: 12-000099

Amount Incurred This Period

21284.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

21284.00

1) **SUBTOTALS** This Period This Page (optional).....

27966.03

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**Schedule D-P****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

RICHARDSON FOR PRESIDENT, INC.

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 Wings Management Co.

 Nature of Debt (Purpose):  
 Travel

Mailing Address 13415 Piedra Grande Pl, NE

City	State	ZIP Code
Albuquerque	NM	87111

Outstanding Balance Beginning This Period

7256.90

Transaction ID: 12-000074

Amount Incurred This Period

0.00

Payment This Period

4600.00

Outstanding Balance at Close of This Period

2656.90

1) **SUBTOTALS** This Period This Page (optional)..... ▶

2656.90

2) **TOTALS** This Period (last page this line number only)..... ▶

292726.99

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

292726.99

**Image# 28991537217**

Form/Schedule: **SB23**

Transaction ID: **23-00-00116-00116**

PAID TO WINGS MANAGEMENT, DEDUCTED FROM DEBT SCHEDULE D

Form/Schedule: **SB23**

Transaction ID: **23-00-00118-00118**

PAID TO WINGS MANAGEMENT, DEDUCTED FROM DEBT SCHEDULE D

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